

# UROLOGY CONSULTATION NOTES - DAVID BROWN

Visit Date: 12/25/2024 | Provider: Dr. Christopher Lee, MD - Urology

## CONSULTATION REQUEST

Referring Physician: Dr. Carlos Garcia, MD - Primary Care

Reason for Consultation: Elevated PSA and prostate cancer diagnosis

Urgency: Routine consultation

Clinical Question: Treatment options for localized prostate cancer

## HISTORY OF PRESENT ILLNESS

56-year-old male with elevated PSA level of 8.5 ng/mL discovered during routine screening. Digital rectal examination revealed a firm nodule in the right lobe of the prostate. Prostate biopsy confirmed adenocarcinoma with Gleason score 7 (3+4). Patient has been on active surveillance for 6 months with stable disease. No symptoms of urinary obstruction, no bone pain, no weight loss. Patient is 56 years old with excellent functional status and desires definitive treatment. Family history of prostate cancer (father diagnosed at age 65).

## PROSTATE CANCER STAGING

Clinical Stage: T1c (nonpalpable, PSA-detected)

Gleason Score: 7 (3+4)

PSA Level: 8.5 ng/mL

Percentage of Cancer: 25% of biopsy cores

Perineural Invasion: Not identified

Lymphovascular Invasion: Not identified

Risk Category: Intermediate risk

## TREATMENT OPTIONS DISCUSSED

1. Active Surveillance:
  - Continue monitoring with PSA and repeat biopsies
  - Risk of disease progression over time
  - Patient declined due to family history
2. Radical Prostatectomy:
  - Open vs. robotic approach
  - Nerve-sparing technique if possible
  - Patient prefers robotic approach
3. Radiation Therapy:
  - External beam radiation vs. brachytherapy
  - Patient prefers surgical option

## ASSESSMENT AND PLAN

1. PROSTATE CANCER - Localized (Gleason 7, PSA 8.5)
  - Plan: Robotic radical prostatectomy for definitive treatment
  - Consider nerve-sparing technique if possible
2. HYPERTENSION - Well controlled
  - Plan: Continue current medication, monitor BP